

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective January 1, 2003

Application or Docket Number

*10/669322*  
*1137*

**CLAIMS AS FILED - PART I**

|   | (Column 1)           | (Column 2)   |
|---|----------------------|--------------|
| TOTAL CLAIMS  | <i>20</i>            |              |
| FOR   | NUMBER FILED         | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | <i>20</i> minus 20 = | <i>0</i>     |
| INDEPENDENT CLAIMS  | <i>3</i> minus 3 =   | <i>0</i>     |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                      |              |

SMALL ENTITY  
TYPE ☐ OR

OTHER THAN  
SMALL ENTITY

| RATE      | FEE        |
|-----------|------------|
| BASIC FEE | 375.00     |
| X\$ 9=    | <i>0</i>   |
| X42=      | <i>0</i>   |
| +140=     | <i>0</i>   |
| TOTAL     | <i>375</i> |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 750.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     |        |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

*3/8/06*

|   | (Column 1)                | (Column 2)                         | (Column 3)    |
|---|---------------------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |                           | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | <i>19</i> Minus <i>20</i> | <i>0</i>                           |               |
| Independent   | <i>3</i> Minus <i>3</i>   | <i>0</i>                           |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                           |                                    |               |

SMALL ENTITY OR

OTHER THAN  
SMALL ENTITY

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           | <i>0</i>       |
| X42=             | <i>0</i>       |
| +140=            |                |
| TOTAL ADDIT. FEE | <i>0</i>       |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

*9-5-06*

|   | (Column 1)                | (Column 2)                         | (Column 3)    |
|---|---------------------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |                           | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | <i>16</i> Minus <i>20</i> | <i>0</i>                           |               |
| Independent   | <i>2</i> Minus <i>3</i>   | <i>0</i>                           |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                           |                                    |               |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$ 9=           |                |
| X42=             |                |
| +140=            |                |
| TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |
|------------------|----------------|
| X\$18=           |                |
| X84=             |                |
| +280=            |                |
| TOTAL ADDIT. FEE |                |

|   | (Column 1) | (Column 2)                         | (Column 3)    |
|---|------------|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT  |            | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   |            |                                    |               |
| Independent   |            |                                    |               |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |            |                                    |               |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.